| Application or Docket Number  |  |   |        |                               |                     |                  |                   |                   |                        |       |                     | ber                    |
|---|--|---|--------|-------------------------------|---------------------|------------------|-------------------|-------------------|------------------------|-------|---------------------|------------------------|
| PATENT APPLICATION E DETERMINATION RECORD   10-08930  |  |   |        |                               |                     |                  |                   |                   |                        |       |                     |                        |
| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |  |   |        |                               |                     |                  | SMALL ENTITY TYPE |                   |                        | OR    | OTHER<br>SMALL      |                        |
| TOTAL CLAIMS  |  |   |        |                               |                     |                  | Γ                 | RATE              | FEE                    | 1 1   | RATE                | FEE                    |
| FOR   |  |   | NUMBER | FILED .                       | NUMBER EXTRA        |                  | B/                | ASIC FEE          | •                      | OR    | BASIC FEE           |                        |
| TOTAL CHARGEABLE CLAIMS   |  |   | 9 mir  | nus 20=                       | •                   |                  |                   | X\$ 9=            |                        | OR    | X\$18=              |                        |
| INDEPENDENT CLAIMS  |  |   | £      | inus 3 =                      | *                   |                  |                   | X42=              |                        | OR    | X84=                |                        |
| MU  | ILTIPLE DEPEN                                  | IDENT CLAIM PI                            | RESENT |                               |                     |                  |                   | +140=             |                        | OR    | +280=               |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2  |  |   |        |                               |                     | L                | TOTAL             |                   | OR                     | TOTAL |                     |                        |
| CLAIMS AS AMENDED - PART II   |  |   |        |                               |                     |                  |                   |                   | ·<br>·                 | •     | OTHER<br>SMALL      |                        |
| (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST   |  |   |        |                               |                     |                  |                   | SMALL I           |                        | OR    | SMALL               |                        |
| AMENDMENT A   |  | REMAINING<br>AFTER<br>AMENDMENT           |        | NUM<br>PREVIO<br>PAID         | BER                 | PRESENT<br>EXTRA |                   | RATE              | ADDI-<br>TIONAL<br>FEE | i     | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total  | . 23                                      | Minus  | ** /                          | 9                   | = 3;             |                   | X\$ 9=            |                        | OR    | X\$18=              | 54                     |
|   | Independent                                    | • 4                                       | Minus  |                               |                     | = /              |                   | X42=              |                        | OR    | X84=                | 86                     |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |        |                               |                     |                  |                   | +140=.            |                        | 20    | +280=               |                        |
|   |  |   |        |                               |                     |                  | L                 | TOTAL             |                        | OR    | TOTAL               |                        |
|   |  |   |        |                               |                     |                  |                   | OIT. FEE          |                        | OR,   | ADDIT. FEE          |                        |
|   |  | (Column 1)                                |        |                               |                     |                  |                   | -                 |                        |       |                     |                        |
| AMENDMENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |        | HIGH<br>NUM<br>PREVIO<br>PAID | BER                 | PRESENT<br>EXTRA |                   | RATE              | ADDI-<br>TIONAL<br>FEE |       | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total  | • 21                                      | Minus  | ## 0                          | 21                  | = \              | :                 | X\$ 9=            |                        | OR    | X\$18=              |                        |
|   | Independent                                    | • 4                                       | Minus  | ***                           | 4                   |                  |                   | X42=              |                        | OR    | X84=                |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |        |                               |                     |                  |                   | 140=              | ·                      | OR    | +280=               | ·                      |
|   |  |   |        |                               |                     |                  |                   | TOTAL<br>DIT. FEE |                        | OR    | TOTAL<br>ADDIT. FEE |                        |
| (Column 1) (Column 2) (Column 3)  |  |   |        |                               |                     |                  |                   |                   |                        |       |                     |                        |
| AMENDMENT C   |  | CLAIMS REMAINING AFTER AMENDMENT          |        | HIGH<br>NUM<br>PREVIO<br>PAID | EST<br>BER<br>OUSLY | PRESENT<br>EXTRA |                   | RATE              | ADDI-<br>TIONAL<br>FEE |       | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total  | •   | Minus  | **                            |                     | =                | ;                 | X\$ 9=            |                        | OR    | X\$18=              |                        |
|   | Independent                                    | *   | Minus  | ***                           | - 01 4 11 1         | =                |                   | X42=              |                        | OR    | X84=                |                        |
|   |  | NTATION OF M                              |        |                               |                     |                  | 1                 | 140=              |                        | OR    | +280=               |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |        |                               |                     |                  |                   |                   |                        |       |                     |                        |